

# NONPROFIT ORGANIZATION ARTS EDUCATION PROJECT GRANT DESCRIPTION, REVIEW CRITERIA, AND CHECKLIST

**Arts Education Project** grants are for any nonprofit organization implementing advanced and innovative arts education initiatives implemented over the course of the fiscal year (July 1, 2008 - June 30, 2009). Projects may include different artistic disciplines. This is not a residency grant. This is not a multiple residency grant.

The maximum grant award for this project is \$10,000 with a 1:1 match.

#### **Review Criteria**

When reviewing applications, panelists look for the following information upon which to base their decisions for funding:

- □ Is the application complete?
- □ Have *all* the narrative questions been answered?
- □ Does the application provide evidence that the school is able to carry out the goals and objectives of the project?
- □ Is there evidence of the artist's educational and artistic qualifications?
- □ Has the applicant completed all reports/evaluations and obligations for past grants? Are these documents thorough, informative and do they document student learning? Were they sent in on time?
- □ Have the artists been contacted and been an integral part of the planning?

#### **Final Checklist for Mailed Submissions**

Do not staple, bind, use sheet protectors, or notebooks on any part of your applicationuse paperclips only.

- □ Grant Cover and Statistical Form
- □ Individual Artist Budget Form(s)
- □ Budget Summary/Matching Funds Form
- □ Narrative
- **□** Signature Form
- □ 2 sets of **Supplemental Materials** (optional)

If any of this is confusing, please see the item-by-item explanation key or call the AE office at (801) 320-9794, or (801) 645-4238.



### NONPROFIT ORGANIZATION ARTS EDUCATION PROJECT COMPLETION KEY

Use the key below to ensure accuracy when completing your application. The numbers below refer to the numbers in the Grant Cover and Statistical Form, Individual Artist Budget Form, Budget Summary and Matching Funds Form boxes, Narrative, and Signature Form.

### **#1-19 GRANT COVER AND STATISTICAL FORM**

- 1. Your organization's name.
- 2. Your organization's street address.
- 3. Your organization's city.
- 4. Your organization's zip code.
- 5. Your organization's county.
- 6. Person at the organization who is authorizing this project and is responsible for assuring matching funds (i.e. director or coordinator).
- 7. Title of person entered in box 6.
- 8. Home and work phone numbers for your authorizing official.
- 9. Your authorizing official's email.
- 10. The on-site coordinator is the person we may call often. This person will need to be familiar with all of the paperwork and schedule requirements, handbook guidelines, financial information, and much more. This person coordinates the whole residency and is the lead contact for our agency. This person may be a director, coordinator, programmer, or administrator.
- 11. Home and work phone for your on-site coordinator. Don't worry; we will call the coordinator at home only if necessary.
- 12. HOME street address for your on-site coordinator. This address is extremely important because planning often takes place in the summer. We also send the grant award letters to the home of the on-site coordinator. (You wouldn't want to miss finding out if you got your grant!)
- 13. HOME city of your on-site coordinator.
- 14. HOME zip code of your on-site coordinator.
- 15. Your on-site coordinator's email. This is our preferred method of communication.
- 16. This is the 9-digit number found on the organization's federal 990 form.
- 17. Check special/underserved populations which will be <u>involved in this project</u>. DO NOT check the boxes just because you have special/underserved populations in your organization's constituency. Note: Underserved populations include highly rural, isolated communities or any population that lacks access to artistic resources.



- 18. U.S. Congressional District Representative for your organization. You can find your representative at <a href="https://www.vote-smart.org">www.vote-smart.org</a>.
- 19. Representative(s) and senators(s) to the Utah legislature: Your organization may have more than one representative and senator. List all that apply. If you do not know the representative for your organization, call (801) 538-1029 and for your senator, call (801) 538-1035 or visit <a href="https://www.utah.gov/government/legislative.html">www.utah.gov/government/legislative.html</a>

### #20 DUN & BRADSTREET (DUNS) NUMBER

20. Beginning 2006-2007, all grant applicants to the Utah Arts Council must register for a Dun & Bradstreet (DUNS) number. This number is free and can be used as an important advocacy tool for the arts. To register online for your Dun & Bradstreet number visit <a href="http://fedgov.dnb.com/webform/displayHomePage.do;jsessionid=B8435A115A15942B145E8A3">http://fedgov.dnb.com/webform/displayHomePage.do;jsessionid=B8435A115A15942B145E8A3</a> <a href="https://fedgov.dnb.com/webform/displayHomePage.do;jsessionid=B8435A115A15942B145E8A3">https://fedgov.dnb.com/webform/displayHomePage.do;jsessionid=B8435A115A15942B145E8A3</a> <a href="https://fedgov.dnb.com/webform/displayHomePage.do;jsessionid=B8435A115A15942B145E8A3">https://fedgov.dnb.com/webform/displayHomePage.do;jsessionid=B8435A115A15942B145E8A3</a> <a href="https://fedgov.dnb.com/webform/displayHomePage.do;jsessionid=B8435A115A15942B145E8A3">https://fedgov.dnb.com/webform/displayHomePage.do;jsessionid=B8435A115A15942B145E8A3</a> <a href="https://fedgov.dnb.com/webform/displayHomePage.do;jsessionid=B8435A115A15942B145E8A3">https://fedgov.dnb.com/webform/displayHomePage.do;jsessionid=B8435A115A15942B145E8A3</a> <a href="https://fedgov.dnb.com/webform/displayHomePage.do;jsessionid=B8435A115A15942B145E8A3">https://fedgov.dnb.com/webform/displayHomePage.do;jsessionid=B8435A115A15942B145E8A3</a> <a href="https://fedgov.dnb.com/webform/displayHomePage.do;jsessionid=B8435A115A15942B145E8A3">https://fedgov.dnb.com/webform/displayHomePage.do;jsessionid=B8435A115A15942B145E8A3</a> <a href="https://example.doi.org/webform/displayHomePage.doi.org/webform/displayHomePage.doi.org/webform/displayHomePage.doi.org/webform/displayHomePage.doi.org/webform/displayHomePage.doi.org/webform/displayHomePage.doi.org/webform/displayHomePage.doi.org/webform/displayHomePage.doi.org/webform/displayHomePage.doi.org/webform/displayHomePage.doi.org/webform/displayHomePage.doi.org/webform/displayHomePage.doi.org/webform/displayHomePage.doi.org/webform/displayHomePage.doi.org/webform/display

#### #21-39 INDIVIDUAL ARTIST BUDGET FORM

21. The UAC/AE program provides grant money to cover artists' salary, travel, lodging, and food costs. In addition, a limited amount of funding for supplies and equipment can be requested. Use the *Individual Artist Budget Form* to request funds for the items listed above. **Please refer to the sample on pages 8-11.** 

Applications must be completed with an artist already committed to the project. <u>Contact your artist(s) of choice prior to submitting your application</u> to confirm their availability and to align project goals, content, and concept.

An Arts Education Project grant may involve more than one artist. Complete the *Individual Artist Budget Form* for EACH artist. You must choose an artist(s) from the Arts Education Artist Roster unless your artist of choice has a known national and/or international reputation. If you are using such an artist, you must submit with your application documentation of their work such as playbills, press packets, raisonnés, vitae, resumes, exhibition lists, touring schedules, or publication lists. The UAC/AE board committee chair will determine if an artist can be used for the project for which you are applying.

If you are using an artistic company (i.e. Utah Symphony & Opera, Repertory Dance Theatre) to augment this project, USE box 45 on the *Budget Summary Form*, NOT the *Individual Artist Budget Form*.

- 22. Your organization's name.
- 23. Your organization's city.
- 24. The name of your on-site coordinator.
- 25. The name of your artist of choice.
- 26. The discipline of your artist of choice (Dance, Film/Video, Literature, Music, Multicultural, Multidiscipline, Storytelling, Theatre, or Visual Art).



- 27. Your artist's home city.
- 28. Your artist's home state.
- 29. After you choose and speak with your artist, briefly describe the project activities in which this artist will be involved. (Please refer to the *Individual Artist Budget Form* **samples** provided for reference.)
- 30. If you are requesting grant monies to cover the cost of materials this artist will need, please list the materials. (NOTE: You can only request up to \$400 worth of supplies. If you have more than one artist you will have to split the \$400 between them.)
- 31. If you are requesting grant monies to cover the cost of equipment (i.e. kiln, Orff instruments, etc.) required by this artist, list the equipment. (NOTE: You can only request up to \$400 worth of equipment. If you have more than one artist, you will have to split the \$400 between them.)
- 32. Enter the number of hours you will be working with this artist <u>each day</u> in the first box. (If the number of hours the artist will be in your school varies from day to day, enter an average.) Enter the hourly wage you will be paying this artist in the second box. (Artists listed in the *Arts Education Artist Roster* expect at least \$30 per hour.) Enter the number of days you will be working with this artist in the third box. Calculate the total salary by multiplying the hours in the first box by the artist's hourly wage in the second box. Discuss these details with your artist. This can be a **tricky box** to complete. Once you enter the numbers into their respective boxes, take the number of hours and multiply them by the number of days to double check your entry. Ask yourself, "Does this figure equal the number of hours I expect the artist to be in my school?"
- 33. If your artist will be driving more than 60 miles round-trip to your project site, you should count on paying for any additional miles above and beyond the initial 60 miles per trip at \$0.48.5 per mile. [For example: If your artist will be traveling 150 miles round trip, you should count on paying \$43.65 (90 x \$0.48.5) each time they will be required to travel to your site.] If your artist is coming from out-of-state, you should count on paying for a compact or midsize rental car and their flight.
- 34. If your artist is from out-of-state or is traveling more than 75 miles from home, they may require lodging. Enter the number of days your artist will need lodging and at what rate you will be charged by the hotel/motel. The allowable state rate ranges between \$60-\$80 (excluding tax) depending on the area. Plan on \$80 for the Salt Lake Valley, \$70 for the Moab area, and \$65 for the Ogden, Provo, and Orem areas. Areas not listed above are required to stay within the range. Therefore, you are under no obligation to put your artist up at a fancy hotel.
- 35. Artists need to eat, too! If your artist is working or traveling during normal eating hours, plan to cover their costs. The state allows for \$35 per day. Plan on \$8 for breakfasts, \$11 for lunches, and \$16 for dinners.
- 36. Estimate the cost of the materials listed in box 30. Please do a little research on the cost of your materials or ask the artist who is requesting these materials for an estimate.
- 37. Estimate the cost of the equipment listed in box 31. Please do a little research on the cost of your equipment.
- 38. Add boxes 32-37. This is the total amount you are requesting from the Utah Arts Council/Arts Education program for this artist.



39. It is best to complete this budget with the artist for accuracy. If possible, run the final numbers by the artist prior to submission.

#### **#40-48 BUDGET SUMMARY**

- 40. The *Budget Summary* is completed by totaling EACH *Individual Artist Budget Form*. **Please** refer to the sample on page 12.
- 41. Your organization's name.
- 42. Your organization's city.
- 43. Your on-site coordinator's name.
- 44. Add boxes 32-35 of EACH *Individual Artist Budget Form*. Add the totals together. Enter the final total here.
- 45. If you are using an artistic company, enter their fee here. Remember, their services must be related to your overall project activities.
- 46. Take box 36 of EACH *Individual Artist Budget Form* and add them together. Enter the total here.
- 47. Take box 37 of EACH *Individual Artist Budget Form* and add them together. Enter the total here.
- 48. Add boxes 44-47. This is the amount your organization is requesting as a grant. The maximum amount your organization can request is \$10,000.

#### #49-64 MATCHING FUNDS

- 49. The total in box 48 must be matched 1:1 with non-UAC funds. The funds matched can be related to this project and other arts projects at your organization. The funds do not need to be direct costs of this project. For example, if you are bringing in additional artists for this project or other arts projects during the fiscal year of July 1, 2008 June 30, 2009, using non-UAC funds, those expenses can be used as matching funds.
- 50. Check the box that is closest to your organization's yearly budget. If your organization's yearly budget is under \$100,000, 75% of your matching funds can be IN-KIND. If your organization's budget is between \$100,000 and \$199,999, 50% of your matching funds can be IN-KIND. If your organization's budget is \$200,000 or greater, 25% of your matching funds can be IN-KIND.
- 51. If any administrator works above and beyond their regular workweek and is PAID for their extra time, it is considered a CASH match. If any administrator devotes a certain percentage of their time to this project, that percentage of their salary can be considered a CASH match. If any administrator works above and beyond their regular workweek and is NOT PAID, it is considered an IN-KIND match.
- 52. If any support staff works above and beyond their regular workweek and is PAID for their extra time, it is considered a CASH match. If any support staff devotes a certain percentage of their



- time to this project, that percentage of their salary can be considered a CASH match. If any support staff works above and beyond their regular workweek and is NOT PAID, it is considered an IN-KIND match.
- 53. If any volunteers devote time and effort to this project, their time is considered a match. If the volunteer is NOT PAID, estimate the number of hours you think they might devote to this project and multiply that by the minimum wage. This is considered an IN-KIND match.
- 54. If you are holding a community arts event in a space that could otherwise be rented, the rental fee is considered an IN-KIND match. If you must rent space for this or any other arts related projects, the fee is considered a CASH match.
- 55. Office supplies, telephone and utilities costs <u>directly related</u> to this project or any other arts project are considered matching funds.
- 56. Organizations often print flyers and invitations to send to constituents or make posters announcing their arts events. These costs are direct matching funds. Any additional publicity that is donated is an IN-KIND match.
- 57. If you have other artists coming to your organization to work with your constituents on this project or any other, you can use their salary as a match. List the names of each artist and their salary or fee. If your organization has an art specialist, a percentage of their salary can be used as a CASH match.
- 58. If you are paying the travel of additional artists (in addition to those listed in the *Individual Artist Budget Form*) to come to your organization, those costs are considered matching funds.
- 59. If you need more than \$400 worth of instructional materials for this project, list the supplies and estimate their costs. If your organization will be purchasing arts materials not related to this project between July 1, 2008 and June 30, 2009, 75% of the cost could be considered matching funds.
- 60. If you need more than \$400 worth of equipment for this project, list the equipment and estimate the cost. If your organization will be purchasing arts equipment not related to this project between July 1, 2008 and June 30, 2009, 75% of the equipment cost could be considered matching funds. If the equipment purchased *were* related to this project, then the total cost would be considered matching fund and the UAC/AE program could cover \$400 of the purchase.
- 61. List <u>specifically</u> those expenses related to this project that do not fall under the above categories and estimate their costs.
- 62. Add boxes 51-61. Enter the total here. This amount must be greater than or equal to box 48.
- 63. List where the funding amount in box 62 comes from. On the same line as the source, enter how much money will be coming from that particular source. (Examples being: Title II, Title VII, Administrative Salaries, Supply Budget, Travel Budget, etc.) REMEMBER to place an asterisk next to donated goods and services (items and services you would have had to pay for if they had not been donated to your project). See the *Budget Summary/Matching Funds Form* sample on page 12.
- 64. This amount should equal box 62.



#### **#65 NARRATIVE**

- 65. This is the "Narrative" portion of your grant. Use at least 12-point, Arial or Times New Roman font. Answer all the questions completely. Do not use reply "not applicable" to any of the questions.
  - o <u>Each</u> page of narrative must indicate at the top:
    - Name of the organization
    - City
    - Name of on-site coordinator
  - o Retype questions prior to answering.
  - o Use single space between paragraphs.
  - o Use 8 ½ X 11 inch white paper, one side only.
  - o Use margins of at least one inch on the top, bottom, and sides of all pages.

### #66-68 SIGNATURE FORM

This is your signature page. All signatures must be original. Do not use stamps or forge someone's signature.

- 66. Please type the name of the person who is authorizing this project and is responsible for assuring matching funds. Please have them sign across from their name.
- 67. Please type the name of the person coordinating this project. This person will be UAC/AE's main contact at your organization. Please have them sign across from their name.
- 68. Please type the name of the person writing this grant and have them sign across from their name.



# 21. INDIVIDUAL ARTIST BUDGET FORM (SAMPLE) DUPLICATE THIS FORM FOR EACH ARTIST

22. Applicant Name	YWCA 23. City					Salt Lake City	
24. On-site Coordinator	Mary Doe						
25. Artist's Name	Paul Steiner 26. Discipli					Visual Art	
27. Home City	Park City		2	28. Home S	State	UT	
29. Artist's Project Activitie							
·		r odmini	01201	oro ond	01100	ort atalf in	
	, two-hour workshops fo						
	n and execution. He wil						
process with twenty c	hildren from the after-so	hool pro	gran	n for fou	r, two-	hour periods.	
30. List required instruction	al materials for which grant fu	ınds are re	queste	ed			
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	s of ½" masonite, and th				•		
,							
31. List required equipment	for which grant funds are req	uested					
None							
32.							
	t's Salary = Total # Hours_	16 X S	alary	30	\$ 480	1	
	(Roster Artists \$30 / All C		-		<b>Þ 400</b>		
	(Rostor Filests \$50 / Filest	other must	3 ψ50 1				
Approximately how m	nany days will your artist of ch	oice be wor	king v	with your			
		ol/organiza					
33.	5011	01, 01 801112					
	Travel (airfare, car rental, or	personal v	ehicle	mileage)	<b>\$ 0</b>		
34.					Ψ •		
	Lodging = d	ays @ \$		per day	<b>\$ 0</b>		
35.					Ψ		
	(MAA V A L L )						
36.	Ψ ++						
	Ψ •••						
37.		2 J · · ·	-4 -	J (100)			
Equip	ment (Total <u>grant</u> equipment t				<b>\$ 0</b>		
38. TOTAL for THIS ARTIST						<b>,</b>	
39. Has this budget bee	en approved by this artist?	Yes	X		No		
		<b>I</b>	1			1 1	



# 21. INDIVIDUAL ARTIST BUDGET FORM (SAMPLE) DUPLICATE THIS FORM FOR EACH ARTIST

22. Applicant Name	YWCA	S	Salt Lake City					
24. On-site Coordinator	Mary Doe							
25. Artist's Name	Fidencio Duran (Texas Art	ne V	isual Art					
27. Home City	Austin		28. Home S	tate T	X			
29. Artist's Project Activitie								
	a lecture about commun	ity murale ti	broughout	the Se	uthwest In			
_	his own public art mura	•	_					
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30. List required instruction	al materials for which grant fu	ınds are reque	sted					
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31. List required equipment	for which grant funds are req	nested						
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None								
32.								
Artist	t's Salary = Total # Hours_4			\$ 1,200	)			
	(Roster Artists \$30 / All C	Other Artists \$30	) minimum)	. ,				
A	J:		<b>:</b> 41					
Approximately now in	nany days will your artist of cho	organization?						
33.	School	oi gamzation.						
	Travel (airfare, car rental, or	personal vehic	cle mileage)	\$ 600				
34.								
	Lodging =13 da	ays @ \$55	per day	\$ 715				
35.	35.  (13 days @ \$35 pan day)  Por diam (food) = 1							
(13 days @ \$35 per day) Per diem (food) = \$ 455								
Supplies (Total grant supply funds cannot exceed \$400) \$ 92								
37.	Ψ <b>0</b> 2							
Equip	<b>\$ 0</b>							
	TIST	φU						
38.	1131	\$ 3,062	<u> </u>					
				. ,- ,-				
39. Has this budget bee	en approved by this artist?	Yes X		No				
					1 1			



# 21. INDIVIDUAL ARTIST BUDGET FORM (SAMPLE) DUPLICATE THIS FORM FOR EACH ARTIST

22. Applicant Name	Green Elementary	23. City	Salt Lake City				
24. On-site Coordinator	Mary Doe						
25. Artist's Name	Rosalind Shaefer	26. Discipline	Dance				
27. Home City	Salt Lake City	28. Home State	UT				
29. Artist's Project Activitie	PS .						
· · · · · · · · · · · · · · · · · · ·	a two-hour workshop for administra	ators and supp	ort staff in				
	nprovisation, and composition. She	• •					
	in creating a dance that reflects the		igitt flours,				
assist the 20 children	in creating a dance that reflects the	iliulai.					
20 I igt magningd in star-stire	nol motoriols for which are the de one	tod					
	nal materials for which grant funds are reques	stea					
None							
31 List required equipment	t for which grant funds are requested						
None	tion which grant funds are requested						
None							
32.	42a Colomo Total # Hanna 10 V Colom	20					
Artis	t's Salary = Total # Hours 10 X Salar	- Ψ ΟΟ	0				
	(Roster Artists \$30 / All Other Artists \$30	minimum)					
Annrovimetaly how n	nany days will your artist of choice be working	with your					
Approximately now in	school/organization						
33.	School of gamzation.						
	Travel (airfare, car rental, or personal vehic	le mileage)   \$ 0					
34.		φ •					
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35.		Ψ					
	Per die	em (food) =					
36.		Ψ					
	Supplies (Total grant supply funds cannot ex	cceed \$400)   \$ 0					
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	ment (Total grant equipment funds cannot ex	ceed \$400)					
Equip		Ψ					
38.	TOTAL for THIS AR'		^				
		\$ 30	U				
		T = +					
39. Has this budget bed	en approved by this artist? Yes	No					



Salt Lake City

23. City

# 21. INDIVIDUAL ARTIST BUDGET FORM (SAMPLE) DUPLICATE THIS FORM FOR EACH ARTIST

**Green Elementary** 

22. Applicant Name

4. On-site Coordinator Mary Doe						
25. Artist's Name	Heidi Smith	26. Discipline	Literary Arts			
27. Home City	Salt Lake City	28. Home State	UT			
29. Artist's Project Activitie	es ·					
	ne-hour workshop for administrator	s and sunno	t staff on rhyme			
	and metaphor. She will assist twent					
1	•	ly Cillial ell 10	eight hours in			
creating poetry that re	mects the mural.					
	al materials for which grant funds are reques	sted				
None						
21 1:4	. f					
	for which grant funds are requested					
None						
32.						
Arti	st's Salary = Total # Hours9 X Salar	ν — — — μ ν	270			
	(Roster Artists \$30 / All Other Artists \$30	) minimum)				
	1 11 44 61 1 1 1	•41				
Approximately how m	nany days will your artist of choice be working					
33.	school/organization	ı?9				
33.	Travel (airfare, car rental, or personal vehic	ele mileage)	n			
34.	Traver (unitare, car rental, or personal venic	ele mileage) \$	<u>J</u>			
J4.	Lodging = days @ \$	per day &	n			
35.	Loughig = uujs ∈ ψ	per day \$	<u> </u>			
33.	Per die	em (food) =	n			
36.		em (food) = \$	<u> </u>			
	Supplies (Total grant supply funds cannot ex	ceed \$400)	•			
	Supplies (10tal grant supply lunus cannot ex	(ceed \$400) \$	U 			
37.		1 (1.400)				
Equip	ment (Total grant equipment funds cannot ex	(ceed \$400) \$	0			
38.	TOTAL for THIS AR	TIST				
		\$	270			
39. Has this budget bee	en approved by this artist? Yes	No				



40. BUDGET SUMMARY (SAMPLE)						
41. Applicant Name	YWCA	42. City	Salt Lake City			
43. On-site Coordinator	Mary Doe		·			

<b>44. Total artists' salaries, travel, lodging, per diem</b> (totals taken from EACH <i>Individual Artist Budget Form</i> )	\$ 4, 456
45. Artistic company fees to augment this project	\$ 0
46. Total project instructional materials (not to exceed \$400)	\$ 392
47. Total project equipment (not to exceed \$400)	\$ 0
48. TOTAL UAC/AE grant funds requested	\$ 4,383

49. MATCHING FUNDS (NON-UAC FUNDS)							
The funds requested in box 47 must be matched 1:1.							
50. \$0 - \$99,5	99 🔲   \$100,000 - \$199,999 🗓   \$200,000 or greater 🗌						
	Rate \$ Amount						
51. Administration	After work time – 4 administrators X 11 hours each @ \$18 per hour.						
52. Support Staff	After work time – 4 staff members X 11 hours each @ \$10/hr.  Support staff time – 2 staff members X 5 hrs for 12 days each @ \$10/hr. Support staff time – 2 staff members X 1 hr for 16 days @ \$10/hr.						
53. Volunteers/Non-Staff	Non-staff assistance 2 assistants for X 5 hours for 12 days each @ 8/hr. 2 assistants X 1 hr for 16 days @ \$8/hr.	\$ 960* \$ 256*					
54. Facility Rental/Use		\$ 0					
55. Office Supplies, Telephone, Utilities		\$ 0					
56. Publicity	Printing flyer	\$ 60					
57. Additional Artists' Salaries	List names and rates below: Kate Jones, staff visual art specialist, \$6,000/year @ 50%=\$3,000	\$ 3,000					
58. Additional Artists' Travel		\$ 0					
59. Additional Instructional Materials	10 gallon paint @ \$11.50/gallon	\$ 115					
60. Equipment	Use of scaffolding 2 days at \$50/day	\$ 100*					
61. Miscellaneous SPECIFY	Food and beverages for opening	\$ 300					
62. TOTAL MATCHING FUNDS \$ 8,181							

63. List the sources and amounts of the matching funds for this project	(ASTERISK in-kind donations)	
Salaries	\$ 4,520	
*Salaries \$2,448 *Sherwin Williams \$600	\$ 3,048*	
Marketing Budget	\$ 360	
Office Supplies Budget	\$ 253	
TOTAL	\$ 8,181	



## NONPROFIT ORGANIZATION ARTS EDUCATION PROJECT GRANT COVER AND STATISTICAL FORM

### Grant Application Funding for July 1, 2008 – June 30, 2009 Deadline: March 1, 2008

1. Organization's Name				
2. Street Address				
3. City		4. Zip Code		
5. County				
6. Authorizing Official's Name				
7. Authorizing Official's Title		8. Phone with Area Code	Home	
			Work	
9. Authorizing Official's E-mail				
10. On-site		11. Phone with	Home	
Coordinator's Name		Area Code	Work	
12. HOME Street Address				
13. HOME City		14. HOME Zip Code		
15. On-site Coordinator's E-mail				
16. Federal Employer Id	dentification Number (9-digits)			
		Physical Disabilities Learning Disabilities	Low Income ELL I	Senior Citizens Other Underserved
Institutionalized		Disabilities Reservation Pop	ulations	Underserved



GRANT COVER AND STATISTICAL FORM continued					
18. U.S. Congressional District Representative	Bishop (District 1)	M	(atheson (District2)	Cannon (District 3)	
19. STATE OF UTAH LEGIS	SLATORS				
Representative(s)  Senator(s) IT IS NOT Bennett or Hatch					
20. Dun & Bradstreet (DUNS New Requirement! To registe Dun & Bradstreet number vis https:eupdate.dnb.com/requestoptic or by phone at 1-866-705-571. Completion Key for explanation	er online for your sit ons/government/ccrreg/ 1. Please see		DUNS Number		



# 21. INDIVIDUAL ARTIST BUDGET FORM DUPLICATE THIS FORM FOR EACH ARTIST 22. Applicant Name 23. City 24. On-site Coordinator 26. Discipline 25. Artist's Name 27. Home City 28. Home State 29. Artist's Project Activities 30. List required instructional materials for which grant funds are requested 31. List required equipment for which grant funds are requested 32.

	Artist's Salary = Total # Hours X Salary	\$
	(Roster Artists \$30 / All Other Artists \$30 minimum)	
	Approximately how many days will your artist of choice be working with your	
	school/organization?	
33.		
	Travel (airfare, car rental, or personal vehicle mileage)	\$
34.		
	Lodging = days @ \$ per day	\$
35.		
	Per diem (food) =	\$
36.		
	Supplies (Total grant supply funds cannot exceed \$400)	\$
37.		
	Equipment (Total grant equipment funds cannot exceed \$400)	\$
38.	TOTAL for THIS ARTIST	
		\$

Yes

No

39.

Has this budget been approved by this artist?



40. BUDGET SUMMARY							
41. Applicant Name		42. 🕻	City				
43. On-site Coordinator			<u>.</u>				
44. Total of all artists' sal			\$	\$			
(totals taken from EACH 45. Artistic company fees			\$	¢			
45. Artistic company fees	w augmei	u inis projeci	Φ				
46. Total project instructi	onal mate	rials	\$				
(not to exceed \$400)			Φ.				
47. Total project equipme (not to exceed \$400)	ent		\$				
48. TOTAL UAC/AE gran	nt funds r	equested	\$				
U		•					
49. MATCHING FU	NDS (N	ION-UAC FUNDS)					
The funds requested in bo	,						
50. \$0 - \$99,		\$100,000 - \$199,999	\$200,	000 or greater			
		Rate		\$ Amount			
51. Administration							
70 C CA FF							
52. Support Staff							
53. Volunteers/Non-Staff							
E 994 B 4 1/T							
54. Facility Rental/Use							
55. Office Supplies,							
Telephone, Utilities							
56. Publicity							
57. Additional Artists'	List nar	nes and rates below:					
Salaries		nes una ruces sero					
58. Additional Artists' Travel							
59. Additional							
Instructional							
Materials							
60. Equipment							
61. Miscellaneous							
SPECIFY							
62. TOTAL MATCHING FUNDS							
63. List the sources and amounts of the matching funds for this project (ASTERISK in-kind donations)							
os. Dist the sources and a	modius 01	one matering runus for tims pro	Jeet (ADTEMBR	\$			
				\$			
				\$			
				\$			
64			TOTA	T \$			



### 65. NARRATIVE (Please see completion key for instructions.)

Name of organization:

City:

Name of on-site coordinator:

- 1. What is the greatest overall arts education need within your constituency? How did you identify that need?
- 2. Describe your organization's current arts education programs.
- 3. Describe the planning process your planning team used in preparation for this application. Who was involved in the planning?
- 4. List three characteristics of the community that you intend to serve and why this project is appropriate for your organization.
- 5. What are your goals, objectives and activities for this project? Include desired arts making and arts learning outcomes and describe the role of artists and/or artistic companies in this project.
- 6. Describe how you will evaluate the effectiveness of your project beyond the standard UAC forms completed by the on-site coordinator and participants (i.e. portfolios, pre-post measurements, on-going interaction with artist and staff, etc.).
- 7. If you have had past funding from the UAC/AE program, describe the impact on your organization (participant achievement, participant and/or staff attitude about the arts, increased community support for the arts, etc.).
- 8. How will you accommodate individuals with special needs?



# **SIGNATURE FORM** (Please make sure this section is on its own page.) 66. Authorizing Official Name (typed) **Signature** 67. On-site Coordinator Name (typed) **Signature** 68. Grant Writer Name (typed) **Signature** Notification of panel decisions will be mailed in mid-June to the Authorizing Official, On-site Teacher, your Artist(s) of Choice, and the home address of the On-site Coordinator. Grant funds are sent directly to the applying organization. (Funds will not be sent to umbrella organizations.)

Keep a copy of this grant application for your records.